Fact Sheet

Module 5: Filing Status

The <u>filing status</u> determines the rate at which income is taxed. There are five filing statuses:

- single
- married filing jointly
- married filing separately
- head of household
- qualifying widow(er) with dependent child

Some taxpayers are eligible to use more than one filing status. Usually, the taxpayer will choose the filing status with the lowest tax rates.

Department of the Treasury—Internal Revenue Service (99)

I.S. Individual Income Tax Return

2011

ш		individual incom	ie iax	Return		- (JMB No. 15	45-0074 IR	S Use Or	· -	o not write or staple in this	
		1, or other tax year beginning			, 2011, e	ending		, 20		_	e separate instruction	
Your first name and initial Last name										You	ur social security nur	nber
If a joint return, spouse's first name and initial Last name								Spo	ouse's social security n	umber		
Home address (numb	per and	street). If you have a P.O. box	x, see instru	ictions.				Ap	t. no.		Make sure the SSN(s	
											and on line 6c are co	orrect.
City, town or post office	e, state, a	and ZIP code. If you have a forei	gn address,	also complete s	paces below (s	see instru	ctions).			Pr	residential Election Car	npaign
											k here if you, or your spouse y, want \$3 to go to this fund.	
Foreign country name Foreign province/county								Foreign post	al code		y, want \$3 to go to this fund. t below will not change your	
										refun	d. You	Spouse
Filing Status	1	Single				4	Head of h	ousehold (wi	th qualit	fying p	person). (See instructio	ns.) If
i iiiig Otatus	2	Married filing jointly (even if only one had income) the qualifying person is a ch									not your dependent, en	iter this
Check only one	3	☐ Married filing separately. Enter spouse's SSN above child's name here. ▶										
box.		and full name here. ▶ 5 Qualifying widow(er) with								epend	dent child	
Exemptions	6a	6a Yourself. If someone can claim you as a dependent, do not check box 6a								. }	Boxes checked on 6a and 6b	
	b	Spouse								<u>.</u> J	No. of children	
	С	Dependents:					Dependent's qualifying for child tax				on 6c who: • lived with you	
	(1) First	name Last name	social security number relat			ionship to you (see instruction				_	 did not live with 	
16											you due to divorce or separation	
If more than four dependents, see											(see instructions)	
instructions and											Dependents on 6c not entered above	
check here ▶□											Add numbers on	
	d	Total number of exemp	tions clain	ned							lines above ▶	Щ
Income	7	Wages, salaries, tips, e	tc. Attach	Form(s) W-2						7		
	8a	Taxable interest. Attac	h Schedul	e B if require	ed					8a		
A.I. I. E ()	b	Tax-exempt interest. D	o not incl	ude on line 8	За	8b						
W-2 here. Also	ach Form(s) 9a Ordinary dividends. Attach Schedule B if required									9a		
attach Forms	b	Qualified dividends 9b										
W-2G and	10	Taxable refunds, credits, or offsets of state and local income taxes								10		
1099-R if tax was withheld.	_11	Alimony received								11		
was withheld.	12	Business income or (loss). Attach Schedule C or C-EZ								12		
If you did not	13	Capital gain or (loss). A				t require	ed, check l	nere 🕨	┙┟	13		
get a W-2,	14	Other gains or (losses).	Attach Fo	rm 4797 .						14		
see instructions.	15a	IRA distributions .	15a			b Tax	kable amour	nt	. [15b		
	16a	Pensions and annuities	16a				cable amour		-	16b		
Enclose, but do	17	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E								17		
not attach, any	18	Farm income or (loss). Attach Schedule F								18		
payment. Also,	19	Unemployment comper								19		
please use	20a	Social security benefits				b Tax	kable amour	nt	.	20b		
Form 1040-V.	21	Other income. List type				01 Th:				21		
	22	Combine the amounts in t					s is your tot	ai income i		22		
Adjusted	23					23						
Gross	24	Certain business expenses		• • • • • • • • • • • • • • • • • • • •	•	1						
Income	05	fee-basis government offic				24			-			
	25	Health savings account				25			-			
	26	Moving expenses. Attac				26			_			
	27	Deductible part of self-em				27			-			
	28	Self-employed SEP, SII										
	29 30	Self-employed health in Penalty on early withdra				30						
						31a						
	31a 32	Alimony paid b Recipi				31a 32						
	33	IRA deduction Student loan interest de							-			
	34	Tuition and fees. Attach							-			
	35	Domestic production acti				35			-			
	36	Add lines 23 through 35								36		
	37	Subtract line 36 from lin							·	37		+